								1	Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003									10/734373				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL I	INTITY	OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			10					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	€ 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			[D minus 20=		•			XS 9=		OR	XS18=		
INDEPENDENT CLAIMS			mi	nus 3 =				X43=		OR	X86*		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+145=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	1	OR	TOTAL	770		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALI	ENTITY	OR	OTHER SMALL		
NT A	270700	CLAIMS REMAINING AFTER AMENOMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total	. 4	Minus		20			XS 9=		OR	X\$18=		
	Independent	. 1	Minus	***	3		1	X43=		OR	X86=		
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-	+		+290=		
								+145=	. 	OR	TOTAL	┝─┤	
•								ADDIT, FE		OR	ADDIT. FEE	L=-	
(Column 1) (Column 2) (Column 3)									1.00	1		1000	
AMENOMENT B		CLAIMS REMAINING AFTER AMENDMENT	MAINING NUM		BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· U	Minus	- 2	Q			X\$ 9=		ОЯ	X\$18=		
	independent	• (Minus	***	<u></u>		4	X43=		OR	X86=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
								ADDIT. FE		OR	ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST ABER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent		Minus	***		-	4	X43=		OR	X86=		
٢	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1	OR			
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." "If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
	The 'Highest She	shar Provincety Pa	aid For' (Total o	r Indepen	dent) is th	e nighest numi	per fo	TAND IN ING	official survey of	~ 111 C			

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